

EXHIBIT ACERTIFICATION REGARDING COMPLIANCE WITH SECTION 188.325, RSMO

Regarding performing, inducing, or assisting in the performing or inducing of or referring for abortions

The vendor certifies, by submission of the proposal and by signing below, that the vendor is not an organization, or an affiliate of organizations, that "perform or induce, assist in the performing or inducing of or refer for abortions".

Suzanne Embry COO Chief Operating Officer
Name and Title of Authorized Representative & Client Services Director

Suzanne Embry
Signature

3/9/2017
Date

EXHIBIT B**VENDOR INFORMATION**

The vendor should provide the following information about the vendor's organization:

1. Provide a brief company history, including the founding date and number of years in business as currently constituted.
2. Describe the nature of the vendor's business, type of services performed, etc. Identify the vendor's website address, if any.
3. Provide a list of and a short summary of information regarding the vendor's current contracts for similar services.
4. List, identify, and provide reasons for each contract/client gained and lost in the past two (2) years.
5. In the table below, indicate if the vendor is a not-for-profit entity that promotes one or more of the following four (4) purposes established by Congress under 42 U.S.C. Section 601 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. If a not-for-profit entity, describe past experience relative to the four (4) purposes.

Not-for-profit entity that promotes one or more of the following (4) purposes: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Purposes Identify specific information about experience:	Clearly identify and describe the experience
Providing assistance to needy families so that children may be cared for in their own homes or in the homes of relatives	
Ending the dependence of needy parents on government benefits by promoting job preparation, work, and marriage	
Preventing and reducing the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies	
Encouraging the formation and maintenance of two-parent families	

6. Describe the structure of the organization including any board of directors, partners, top departmental management, corporate organization, corporate trade affiliations, any parent/subsidiary affiliations with other firms, etc.
7. Provide a list summarizing any pending or final legal proceedings involving you or your company that took place in any court of law, administrative tribunal or alternative dispute resolution process that was filed, settled or gone to final judgment within the last three (3) years. The summary need not disclose confidential information of a disputed allegation of fact or law, but must contain the allegations made and/or contested or findings of the court of law, tribunal or dispute resolution process. Failure to provide a full and accurate summary of legal proceedings may result in rejection of the proposal or termination of any subsequent contract.

Vendor Information

1. Guiding Star Mid Missouri was founded on January 3, 2017.

2. Our website is:

Our Business Location is 116 North Jefferson, St. James, MO 65559

The services we perform at this time are:

- Educational Classes – Family Life and Natural Family Planning, Fertility, Healthy Pregnancy, Sex Trafficking Awareness, Lactation, Childbirth.
- We hold Community Sponsored Baby Showers for clients who complete healthy pregnancy classes
- We provide donated resources to our clients
- We go with Clients to help them enroll in needed resources and college classes
- We resource with the community to meet the needs of our clients
- We work with clients to help them further their education, get safe housing, get into maternity homes, find employment, get connected to churches and women's groups
- We follow-up weekly with clients and help them get connected with the community
- We strive to provide community resources, education, and life coaching that all promote a "Culture of Life"
- We Provide Life Coaching and Resources through Pregnancy, Post Pregnancy, Post Abortive, Family Crisis, and help with community drug rehabilitation issues.

3. We have no other contracts for similar services

4. All of our current clients are either pregnant mothers currently or have recently delivered. They are all current clients. We do not have contracts with them currently. We have not lost any clients to date.

5. We are a Not for Profit entity that does promote:

Providing Assistance to needy families so that they can take care of their children in their own homes or the homes of relatives by:

We have helped with transportation, tire replacement, birth certificate fees for housing with parents and grandparents, Pack n Play for safe sleeping given away to parents

Ending dependence of needy parents on government benefits by promoting job preparation, work, and marriage by:

A donor to our organization lent our client and her husband a car for three months through us so that a client with a NICU baby could find a place to live and seek employment to care for their three children. Another client needed help with the FASFA and our Client services

director helped her with the forms, went with her to meetings with the college and mojobs. gov program. She is now signed up and attending college.

Preventing and reducing the incident or out of wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies by:

We are working on developing this. At current one of our pregnant clients is engaged and her and her husband both attend a weekly healthy pregnancy class together. We are hoping to include the fathers and promote family bonding and building through our education classes. After our last healthy pregnancy class one of our clients got married and is working with several resources including us to maintain a family.

We are encouraging the formation and maintenance of two – parent families by: We are working to implement family and marriage classes, resources, and provide information about local church women's groups for those who would like them. We hope to hold these classes soon. We pray for our clients and we pursue others who will pray for them, too.

6. We have an advisory board of directors that consists of two people at this time. Our board of directors has four people. There is a President, Vice President, Secretary, and Treasurer and Medical Director. Our employees consist of and Executive Director and A Chief Operating Officer who is also the Client Services Director.

7. None

EXHIBIT CCERTIFICATION REGARDING EXEMPTION FROM INCOME TAXATION

The vendor certifies, by submission of the proposal and by signing below, that the vendor is "exempt from income taxation pursuant to the United States Internal Revenue Code".

Suzanna L. Embury Chief Operating Officer & Client
Name and Title of Authorized Representative services Director

Suzanna L. Embury
Signature

3/8/17
Date

EXHIBIT DCURRENT/PRIOR EXPERIENCE

The vendor should copy and complete this form documenting the vendor and subcontractor's current/prior experience considered relevant to the services required herein. In addition, the vendor is advised that if the contact person listed for verification of services is unable to be reached during the evaluation, the listed experience may not be considered.

Vendor Name or Subcontractor Name: <u>Guiding Star Mid MO</u> (if reference is for a Subcontractor):	
Reference Information (Current/Prior Services Performed For:)	
Name of Reference Company/Client:	<u>AFL</u>
Address of Reference Company/Client:	<u>P.O. Box 65</u> <u>Greenwood, MO 64034</u>
Reference Contact Person Name, Phone #, and E-mail Address:	<u>Marsha Middleton</u> <u>marsha@allianceforlife.com</u> <u>1-816-806-4168</u>
Title/Name of Service/Contract	
Dates of Service/Contract:	
If service/contract has terminated, specify reason:	
Size of Service such as: ✓ Number of Individuals Being Served ✓ Total Annual Value/Volume	
Size of Service/Contract (in terms of vendor's total amount of business)	
Description of Services Performed, such as: ✓ Population Served ✓ Type of Services Performed ✓ Geographic Area Served ✓ Vendor's specific duties and strategic objective	
Personnel Assigned to Service/Contract (include position title):	

EXHIBIT EEXPERTISE OF KEY PERSONNEL

(Copy and complete this table for each key person proposed. Titles of personnel should be consistent with titles referenced throughout the RFP.)

Title of Position: <u>Client Intake RN</u>	
Name of Person:	<u>Elizabeth A Freeman</u>
Educational Degree (s): include college or university, major, and dates	<u>Washington School of Practical Nursing 2005-2006</u> <u>ECC - RN program 2013-2015</u> <u>CMU-2016</u>
License(s)/Certification(s), #(s), expiration date(s), if applicable:	<u>Registered Nurse</u>
Specialized Training Completed.	<u>None</u>
# of years experience in area of service proposed to provide:	<u>10</u>
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	
Describe this person's responsibilities over the past 12 months.	<u>Patient intake, assessment, vital signs, IV infusion, nutrition analysis</u>
Previous employer(s), positions, and dates	<u>Preventive HealthCare 2015-current</u> <u>Life Care Center 2010-2015</u> <u>St Clair Nursing Center 2015-2016</u>
Identify specific information about experience in:	Clearly identify the experience, provide dates, describe the person's role and extent of involvement in the experience
✓ Early childhood development	
✓ Family/marital counseling	
✓ Social work	
✓ Case management	
✓ Program administration	

RE: Exhibit EExpertise of Key Personnel

Title of Position: COO (Chief Operating Officer) and Client Services Director

Name of Person: Suzanna Embry

Educational Degrees: Including College, Major, and Dates	Bachelor's in General Studies with emphasis on Human Services and Criminal Justice with an additional Minor in Business Management all from Columbia College, Missouri Graduate Date: May 24 th , 2016 Associate of Arts in Human Services form Columbia College : December 15 th , 2015 Associate of Science in Biology From Wabash Valley Junior College: May 1994 Additional Classes taken: Anatomy and physiology 2 and Chemistry at Drury University, December 2016 Human Nutrition and Human Life Span and Development at East Central College July 2016 4 deans awards, Alpha Sigma Lambda honors, and Cum Laude Graduate
Certification	CPR, First Aid, and AED for the HealthCare Provider To October 2017
Specialized Training	None
# of years experience in area of service purposed to provide:	1.Volunteer for Birthright of Rolla for seven years with these duties: Life Coach Crisis intervention Office Work Resource managing Following a budget and working with the director develop it. Client Services Community Representative at PCCAN Meetings Donor Relations Fund Raising Managing Case Files with Clients 2. 10 months(November 2015 to Aug 2016) working with 2 physicians as a patient intake and diagnostic test administer left for a paid position with Birthright and Hope Alliance as an Administrative Assistants and Client Services

	<p>worker</p> <p>3. 5 years of Service as a Publications Director/Member Representative to Missouri State Group, FHE and voting member of the board of Directors</p> <p>4. Home School Mom and Support Group Leader for 18 years. 1996 to 2014</p> <p>5. Conference Representative for HSLDA of Virginia 2012-2014, twice a year memberships ranging from \$100 to \$1000, Assisting Supreme Court Docket Scott Woodruff and his Legal Assistant and running an event for them on my own.</p>
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships	I was a volunteer for Birthright when Alison Guzman was on the Board of Directors for Birthright, when she was a director at two different time periods, and we worked together in 2016. I was her Administrative Assistant.
Describe this persons responsibilities of the past 12 months	Suzanna has worked large fund raisers along side of Alison Guzman, She has helped plan events for both clients and donors. She has worked with clients for many hours passed the times she was paid to do so and maintained good client records as well as relationships with other resources in the community that she used to network with to help clients. She follows up and maintains good relationships with her clients.
Identify specific information about experience in: Early Childhood development	Suzanna has worked with children in the community from the age of 14 teaching gymnastics classes 6 days a week to over 150 children a week for ten years and then as her own children were raised she mentored families in the homeschooling community in two states, She is now a grandma of soon to be 3. In addition to this Suzanna has worked with birthright clients and their children for several years.
Family/Marital Counseling	None
Social Work	<p>None formal</p> <p>Volunteer care for Birthright clients and their families for approximately 7 years</p> <p>Homeschooling family volunteer work and helping families get the legal help they need for 20 years</p>
Case management	Volunteer care for Birthright clients and their families (helping clients figure out their own needs and solutions to get to the goals they set for themselves, forming a plan, following through with them weekly, staying the course)

<p>Program Administration</p>	<p>This is something I have done in some aspect or another in many areas for the last 20 years from convention representation, to home school programs and large events 200 people or more to work at Birthright, 80 page booklet publications revisions and yearly updates for FHE, State publications Director, RHAA Rolla HomeSchool Athletic Association Volleyball program coordinator, CHESS (Christian Home School Support System) Leader of several events and mentor, and helped oversee large fundraisers,,, most was volunteer work</p>

Name of Person:	Alison Guzman
Educational degree(s): include college or university, major, and dates	A.A. in Business Administration from East Central College, May 2009 B.A. in Business Administration from Columbia College, May 2013
License(s)/cerifications(s), #(s), expiration date(s), if applicable:	N/A
Specialized Training Completed:	Post-abortion counseling, CASA training, miscarriage support training
# of years experience in area of service proposed to provide:	5 years
Describe person's relationship to vendor. If employee, # of years. If subcontractor, describe other/past working relationships:	I am an employee of Guiding Star Mid-Missouri since February 2017.
Describe this person's responsibilities over the last 12 months.	Executive Director: paperwork, administrative duties, client relations, donor relations, speaking engagements, etc.
Previous employer(s), positions, and dates	Birthright of Rolla: volunteer coordinator, August 2011-August 2013, Program Director, August 2013-February 2014, Executive Director, February 2014-December 2016
Identify specific information about experience in: Program administration:	Experience as program director of non-profit
Early childhood development	5 years of teaching child development/parenting classes
Family/ marital counseling	5 years of life coaching
Social work	5 year experience through Birthright, 2 years through CASA
Case Management	Limited experience with previous clients

EXHIBIT K**BUSINESS ENTITY CERTIFICATION, ENROLLMENT DOCUMENTATION,
AND AFFIDAVIT OF WORK AUTHORIZATION****BUSINESS ENTITY CERTIFICATION:**

The vendor must certify their current business status by completing either Box A or Box B or Box C on this Exhibit.

- | | |
|---------------|---|
| BOX A: | To be completed by a non-business entity as defined below. |
| BOX B: | To be completed by a business entity who has not yet completed and submitted documentation pertaining to the federal work authorization program as described at http://www.uscis.gov/e-verify . |
| BOX C: | To be completed by a business entity who has current work authorization documentation on file with a Missouri state agency including Division of Purchasing. |

Business entity, as defined in section 285.525, RSMo, pertaining to section 285.530, RSMo, is any person or group of persons performing or engaging in any activity, enterprise, profession, or occupation for gain, benefit, advantage, or livelihood. The term "business entity" shall include but not be limited to self-employed individuals, partnerships, corporations, contractors, and subcontractors. The term "business entity" shall include any business entity that possesses a business permit, license, or tax certificate issued by the state, any business entity that is exempt by law from obtaining such a business permit, and any business entity that is operating unlawfully without such a business permit. The term "business entity" shall not include a self-employed individual with no employees or entities utilizing the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

Note: Regarding governmental entities, business entity includes Missouri schools, Missouri universities (other than stated in Box C), out of state agencies, out of state schools, out of state universities, and political subdivisions. A business entity does not include Missouri state agencies and federal government entities.

BOX A – CURRENTLY NOT A BUSINESS ENTITY

I certify that _____ (Company/Individual Name) **DOES NOT CURRENTLY MEET** the definition of a business entity, as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above, because: (check the applicable business status that applies below)

- ☐ - I am a self-employed individual with no employees; **OR**
- ☐ - The company that I represent employs the services of direct sellers as defined in subdivision (17) of subsection 12 of section 288.034, RSMo.

I certify that I am not an alien unlawfully present in the United States and if _____ (Company/Individual Name) is awarded a contract for the services requested herein under _____ (RFP Number) and if the business status changes during the life of the contract to become a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo then, prior to the performance of any services as a business entity, _____ (Company/Individual Name) agrees to complete Box B, comply with the requirements stated in Box B and provide the Division of Purchasing with all documentation required in Box B of this exhibit.

Authorized Representative's Name (Please Print)

Authorized Representative's Signature

Company Name (if applicable)

Date

EXHIBIT K, continued

(Complete the following if you DO NOT have the E-Verify documentation and a current Affidavit of Work Authorization already on file with the State of Missouri. If completing Box B, do not complete Box C.)

BOX B – CURRENT BUSINESS ENTITY STATUS

I certify that Guiding Star Mid MO (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530.

Suzanna L. Embry
Authorized Business Entity Representative's
Name (Please Print)

Suzanna L. Embry
Authorized Business Entity
Representative's Signature

Guiding Star Mid MO
Business Entity Name

3/17/17
Date

suzanna@guidingstar mid mo, org
E-Mail Address

As a business entity, the vendor must perform/provide each of the following. The vendor should check each to verify completion/submission of all of the following:

- ☒ - Enroll and participate in the E-Verify federal work authorization program (Website: <http://www.uscis.gov/e-verify>; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;

AND

- ☒ - Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include EITHER the E-Verify Employment Eligibility Verification page listing the vendor's name and company ID OR a page from the E-Verify Memorandum of Understanding (MOU) listing the vendor's name and the MOU signature page completed and signed, at minimum, by the vendor and the Department of Homeland Security – Verification Division. If the signature page of the MOU lists the vendor's name and company ID, then no additional pages of the MOU must be submitted;

AND

- ☒ - Submit a completed, notarized Affidavit of Work Authorization provided on the next page of this Exhibit.

EXHIBIT K, continuedAFFIDAVIT OF WORK AUTHORIZATION:

The vendor who meets the section 285.525, RSMo, definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now Suzanne Embry (Name of Business Entity Authorized Representative) as CEO (Position/Title) first being duly sworn on my oath, affirm Guiding Star Mid MO (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the State of Missouri for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that Guiding Star Mid MO (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided under the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

Suzanne L. Embry
Authorized Representative's Signature

Suzanne L. Embry
Printed Name

Chief Operating Officer
Title

3/17/17
Date

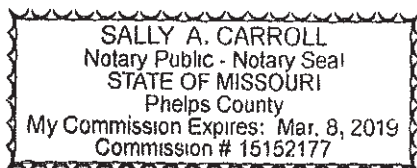
suzanne@guidingstarmidmo.org
E-Mail Address

1180146
E-Verify Company ID Number

Subscribed and sworn to before me this 17 of March 2017. I am
(DAY) (MONTH, YEAR)
commissioned as a notary public within the County of Phelps, State of
(NAME OF COUNTY)
Missouri, and my commission expires on March 8, 2019.
(NAME OF STATE) (DATE)

Sally A. Carroll
Signature of Notary

3/17/17
Date





Company ID Number: 1180146

Approved by:

E-Verify Employer Agent Employer Guiding Star Rolla	
Name (Please Type or Print) Suzanna L Embry	Title
Signature Electronically Signed	Date 03/16/2017
Department of Homeland Security – Verification Division	
Name (Please Type or Print) USCIS Verification Division	Title
Signature Electronically Signed	Date 03/16/2017

Company ID Number: 1180146

Information Required for the E-Verify Program

Information relating to your Company:

Company Name	Guiding Star Rolla
Company Facility Address	116 West Eldon Saint James, MO 65559
Company Alternate Address	P.O. Box 1512 Rolla, MO 65402
County or Parish	PHELPS
Employer Identification Number	454370118
North American Industry Classification Systems Code	624
Parent Company	The Guiding Star Project
Number of Employees	1 to 4
Number of Sites Verified for	1